



Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

ELECTION DEPT.
SOMERVILLE, MA

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2013 FEB -4 A 10:02

Fill in dates:

Reporting Period Beginning Month JAN Date 01 Year 2012 Ending Month DEC Date 31 Year 2012

Type of report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ Year-end report ☐ dissolution

Bruce M. Desmond

Full Name of Candidate (if applicable)

Alderman at Large

Office Sought and District

220A Summer St Som

Residential Address

617 666-1757

Tel. No. (optional)

CTE Bruce Desmond

Committee Name

Barbara A. Desmond

Name of Committee Treasurer

220A Summer St Som

Committee Mailing Address

617 666-1757

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 2252.46
Line 2: Total receipts this period (page 2, line 11) \$ 200.-
Line 3: Subtotal (line 1 plus line 2) \$ 2452.46
Line 4: Total expenditures this period (page 3, line 14) \$ 2410.-
Line 5: Ending balance (line 3 minus line 4) \$ 42.46
Line 6: Total in-kind contributions this period (page 4) \$ 0
Line 7: Total (all) outstanding liabilities (page 4) \$ 20,691.69
Line 8: Name of bank(s) used EAST CAMBRIDGE SAVINGS

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Treasurer's signature (in ink)

Barbara A. Desmond

Date

2/1/13

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☒ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Candidate's signature (in ink)

Bruce M. Desmond

Date

2/1/2013

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
	N/A			
Line 9: Total receipts in excess of \$50 (or listed above)		0		
Line 10: Total receipts \$50 and under* (not listed above)		200	00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		200	00	Enter on page 1, line 2

* If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
1/5/12	Barbara Desmond	220 A Summer St Somerville Ma	Partial Loan Repayment	500	-
1/27/12	Bruce Desmond	220 A Summer St Somerville Ma	Partial Loan Repayment	800	-
5/10/12	Bruce Desmond	220 A Summer St Somerville MA.	Partial Loan Repayment	500	-
3/16/12	Emily Desmond	140 Clark Rd Lowell Ma	entertainment fee - St. Pat's Party	100	-
5/6/12	Brian Gagnon NYNJ Track Club	New York, NY	Donation to cover expenses to Olympic Trial	100	-
4/17/12	Joann O'Leary Shane SHS Hockey Ad	Shore Drive Somerville, MA	cost for 1 Pg. Ad	100	-
8/15/12	Somerville Book Boxing Club	11 OTIS ST Somerville MA	Donation SPONSOR FIGHT NIGHT	250	-
Line 12: Expenditures over \$50				2350	-
Line 13: Expenditures \$50 and under*				60	-
Line 14: TOTAL EXPENDITURES				2410	-

Enter on page 1, line 4-

*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	N/A			
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				

Enter on page 1, line 6

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
10/16/97	Anthony's Function Hall	156 Highland Ave Somerville	Hall Rental	\$ 410
9/1/99	Bruce & Barbara Desmond	220A Summer St Somerville	Loan	\$13,458.72
7/21/04	"	"	Loan	4,000.-
7/28/04	"	"	Loan	950.-
12/1/2005	N-STAR	P.O. Box 4508 Woburn MA	Utilities	\$ 372.92
12/1/1999	Sullivan & McDermott Attys at Law	1990 Centre St West Roxbury	Legal Services re-count	\$1,500
Line 18: OUTSTANDING LIABILITIES (ALL)				\$20,691.64

Enter on page 1, line 7